



B/C 2811515955

No. 5860/4

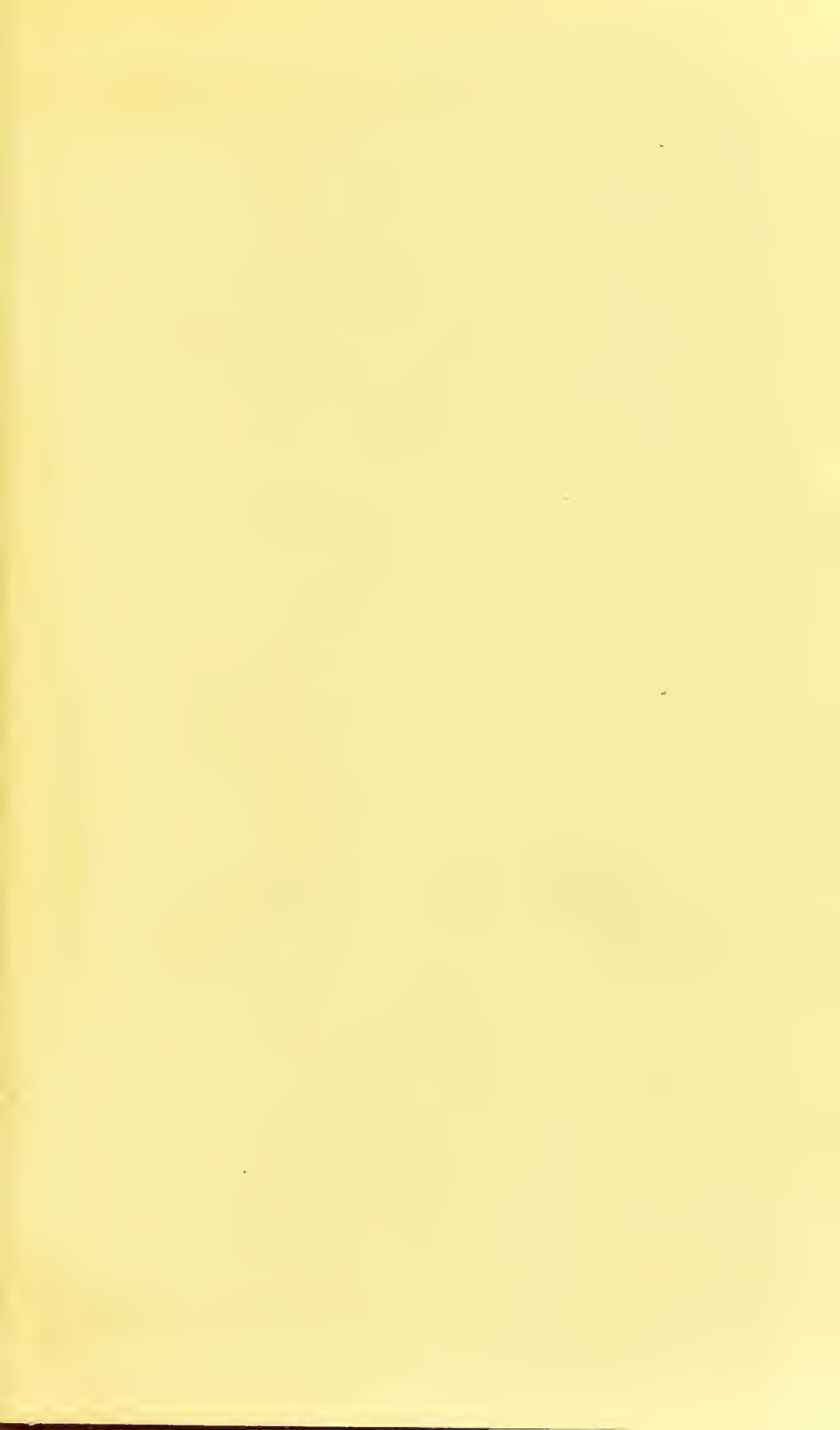
240



THE INSTITUTE
OF
OPHTHALMOLOGY
LONDON

EX LIBRIS

OPHTHALMOLOGY HC246 GONDRET [2]





Digitized by the Internet Archive
in 2014

<https://archive.org/details/b21284507>

ON THE
TREATMENT
OF THE
CATARACT,
WITHOUT OPERATION,

AT THE
ROYAL OPHTHALMIC HOSPITAL, MOORFIELDS,

UNDER THE AUSPICES OF
F. TYRRELL, ESQ. SURGEON,

AND
MM. MACKMURDO AND DALRYMPLE, ASSISTANTS.

BY
LOUIS FRANCOIS GONDRET,

Physician of the Faculty of Paris; Founder of the Clinical Ophthalmologia at the Hôtel-Dieu of Paris; Honorary Physician to the Dispensaries of the Philanthropic Society; Consulting Physician of the Royal Asylum for the Blind; Physician attached to the Tribunal de Première Instance de la Seine; Honorary Member of the Society of Practical Physicians of Paris; Corresponding Member of the Imperial Medico-chirurgical Academy of Saint Petersburg; and of the Society of Physicians of Lyons; Author of several Memoirs read at the Royal Institute of France; and of a Theoretical and Practical Treatise on Derrivation, &c. &c.

LONDON:
SAMUEL HIGHLEY, 32, FLEET STREET.

1838.

LONDON

PRINTED BY G. ARMAND 46, RATHBONE PLACE, OXFORD STREET.

169666

PREFACE.

I LONG cherished the project of coming to London, with the intention of acquiring information as regards the specialities of medicine generally, but more particularly in cases of ocular affection. I chiefly felt the need of it with reference to this last mentioned subject, having had no opportunity in Paris of receiving the least aid from the labours of my contemporaries, since the city was unprovided with an ophthalmic establishment, until the governors of the hospitals invited me to make the application of my method at the Hôtel-Dieu.

On my arrival in London, I paid a visit to Sir Astley Cooper, under the auspices of his universal reputation, and accompanied by Dr. Bureau Riofrey, who takes a pleasure in rendering every possible assistance to his compatriots during their sojourn in the capital, and whose "Continental Review" forms a connecting link for the scientific of all the different nations of Europe. We had with Sir Astley Cooper a conversation rendered interesting in the extreme, by his relation of certain practical facts of the greatest importance. Having told him that, for some time, I had devoted myself to cerebral and ocular affections, and, among others, to the treatment of the cataract without operation, he had the kindness to present me with his memoir on his experiments concerning the tying of the carotid and vertebral arteries, of the phrenic, pneumo-gastric and grand sympathetic nerves, and of the jugular veins. The results of these ingenious operations are of a great importance, and reflect much light on the principles of my practice. Setting no bounds to his kindness, he gave me a letter of recommendation to his nephew, Mr. Tyrrell, a surgeon.

The reception I met with from this latter gentleman was such as to satisfy to the full my whole desire, particularly as he permitted me to attend him in his clinical practice. From the very first day, I was enabled to appreciate the extent of Mr. Tyrrell's medical judgment. He shewed to the pupils a young man who had had a commencement of amaurosis resulting from a disease of the heart. It is by his treatment of this latter organ that he cured the ocular affection. Such would not have been the result if the treatment of the visual organ had been confined to its individual locality,—most assuredly not had a number of leeches been applied. My attention having been called to cases of cataract, a disease which, in London, is allowed to develope itself with the intent of operating when it arrives at maturity, I declared to Mr. Tyrrell that this malady presents, in its different phases, several periods during which it is easy

to arrest its progress. Mr Tyrrell instantly decided upon confiding to my care several patients, in order that I might treat them during the consultation, and, as a proof of the interest he takes in the subject, he has allowed me to see the patients at my own residence, on those days when there is no consultation at the hospital, in consequence of my representing to him the necessity of seeing them frequently, and which I consider indispensable, at least at the commencement of the treatment. By the good offices of Mr. Tyrrell, his assistants, MM. Mackmurdo and Dalrymple, have also been pleased to co-operate in furtherance of the same object. Finally, these gentlemen have evinced their good-will by a trait of the most honorable character,—they inform me when the patients acknowledge an amendment. I shall never be able sufficiently to express to those gentlemen, how greatly I consider them entitled to my esteem and gratitude.

DISCOURSE.

REASON and experience have been my guides in the discovery of a therapeutic method applicable to a great number of diseases. It is to the ancients that I am indebted for the knowledge of the method; but the present advanced state of science has enabled me to modify and improve it.

By confining my attention to the treatment of chronic affections, and, in particular, cerebral diseases of this character, I have been led to study ocular lesions. The relief of the cerebral affections influence those of the eyes, because those organs belonging to the encephalus by their vessels, their nerves, and by an immediate connection, it naturally follows that disorders which are transmitted to them by the brain, will be favourably affected by an improvement in the state of that organ.

Now I attribute these happy results, in a great measure, to three agents, which exercise a great influence in the physical world, and, consequently, in the human organization. In effect, therapeutics are not exclusively confined to what are called medicaments: they extend to all physical and moral agents capable of modifying a malady, and indeed the sphere of action of any remedy is greater in proportion as it possesses a general property. Antimony, mercury, opium, bark, &c. are important medicaments; but the influence which they exercise over the health is not so universal as that of gravity, or the air, and its different physical and chemical qualities. Thus, if the vertical position be not duly alternated with the horizontal, as it often happens in the army, when forced marches are performed by day and by night, we fall with fatigue,—that is to say, that our body can no longer struggle against the power of gravity. However young a man may be, under such circumstances, the fluids rush to the inferior members and swell them, being no longer absorbed in proportion to their exhalation, and it has often been found necessary to cut the boots before they could be removed. I have seen soldiers who, no longer able to support themselves, have stopped short, indifferent to the danger which menaced them. Now in this case, all that is required is, a little rest in the horizontal position to re-establish the equilibrium and strength. Thus it is that rest corrects the effects of fatigue; that obscurity removes the effects of watching. It is well known that there are, in the atmospheric air,

other conditions by no means less important to man than the alimen- the most indispensable to the support of life. We are under the influence of its thermometrical and hydrometrical variations; and, in this respect, the middle terms of the influence which these variations exercise over us, are the remedies for the extremes. Man could not live in the North did he not correct the intensity of the cold by habitations suitably warmed.

There is still another condition as respects the atmospheric air, and without which we could not exist. I have just spoken of the pressure of the air on our bodies. It is known that, on a level with the sea, a man of an ordinary stature supports himself in a state of equilibrium under the pressure of a weight of air equivalent to 33,604 lbs. But then it must be remembered the effects produced on us vary according to the rarity or density of the air. To the too great rarity of the air, which, on high mountains, produces hæmorrhage and inflammation, we must oppose the dense air of the plain near the level of the sea.

The most direct and natural inference to be drawn from the pressure of the atmosphere is, that the vacuum, vulgarly known by the term: cupping, constitutes one of the most important remedies against every malady originating in a derangement of the circulation of the fluids. Twenty years ago, this remedy was not in use in France. The ancients, however, made use of it in certain cases; and it has retained its popularity in several countries, as in England, Germany, Russia and Egypt. At the epoch just mentioned, scarifiers were not manufactured in France. I had one made by an English model, and, since that time, this branch of industry has been somewhat developed, as well as the practice of cupping. I also had made a great number of cups, perforated at the top, in a great variety of elliptical forms, and of different dimensions, small, middling and large, to appropriate them to the different parts of the body. To these glasses I adapted the air-pump; and I am convinced, by long experience, that the creation of a vacuum (or cupping) with or without scarification is, of all remedies, the safest, the most prompt, as well as the most efficacious *in the first stage* of maladies bearing the character of plethora, inflammation and hæmorrhage. Still more, I have verified the fact that it is extremely useful, in the exploration of diseases, to call to our aid a means of elucidating the diagnostic: this means, the sensation of a weight in the part which has been or is still affected, very often accompanies or follows, particularly in the head, the other symptoms, designated by the ancients as characteristic of these maladies, viz: heat, redness, tumefaction and pain. The symptom of pressure or weight generally indicates, with tolerable exactness, the presence of an excess of matter in the part thus affected; and it is then its presence offers us a means of avoiding a diagnostic

error, by recalling our attention to an affection not entirely removed, although its existence be but faintly signalized.*

There is another agent—fire, which the ancients employed with great advantage. Hippocrates has said : ὅσα φαρμακὰ οὐκ ἴηται, σιδήρεος ἴηται, ὅσα δὲ σιδήρεος οὐκ ἴηται, πῦρ ἴηται, πῦρ ἴηται, ὅσα δὲ πῦρ οὐκ ἴηται ταῦτα χρὴ νομίζειν ἀνίατα.—Maladies which medicaments do not cure, are cured by the knife ; those which the knife does not cure, are cured with fire ; and those which fire does not cure, must be regarded as incurable.

This remedy has been employed at different epochs up to our time, and particularly by Scultettus, a physician of Ulm, in the 17th century. The subject was explained at some length fifty years ago, in a work by Percy under the title of “Surgical Pyrotechny.” This work and the examples of our ancestors were my guides, and, in affections of the brain and the eyes, I have seen the most remarkable effects result from the employment of scinciputal cauterization by fire. It will, perhaps, not be amiss to detail the fact which made me resolve to adopt this practice.

Nearly thirty years ago, I was called upon to attend a young girl between 16 and 17 years of age, who, from her infancy, had been epileptic—for six years, she had been an idiot ; and she had totally lost the sight of the left eye, although that organ, by its external appearance, seemed to be in its natural state. I effected on the Sinciput, with the hollow cauterizing iron of Scultettus, a circular cauterization, so as to affect all the soft parts. I took care to keep the bowels open ; by means of cupping at the back of the neck, and dry cupping on the thighs, I guarded against all cerebral plethora ; and the following were the results of this treatment. During four months, only one slight attack of epilepsy in lieu of several strong ones in a week, complete re-establishment of the intellectual faculties and the powers of vision. I was greatly delighted at so satisfactory a result, particularly the perfect cure of the amaurosis. So happy a change could only be attributed to the treatment, since no remedy previously employed had produced any effect. After such wonderful success, I could but persevere in this therapeutic course. But it was impossible to establish the practice of cauterization with an iron heated to incandescence. It is true, I considerably reduced the space of time required in the application of fire with an instrument of steel, by composing a cautery, which, as it absorbs seven

* Vide my memoir on the effects of atmospheric pressure on the human body, and the use of cupping in a great number of maladies, read at the Institute of France, in 1818 ; and my refutation of the report of the Royal Academy of Medicine, on the experiment of Dr. David Barry, concerning external absorption.

or eight times as much caloric, reduces the time required for the operation to a second, or, at most, two seconds. I succeeded, too, in considerably diminishing the pain, by giving the copper cautery a linear form : still it was the application of fire ; and though reason and experience may warrant its use, the natural repugnance of patients, and, above all, the evil passions excited by success, form insurmountable obstacles to its propagation.

It is to restrain, as much as possible, the use of the incandescent cautery, that I have taken great pains to discover a body, possessing the same degree of utility without exciting any dread. I have succeeded beyond my expectations, by prosecuting my experiments with ammoniac, of which I form an homogeneous body as in the following formula.

R. Of Axungia, (hog's-lard). . . .	3vii.
Of Oil of Sweet Almonds. . . .	3i.
Of Ammoniac in Solution @ 26° . .	3iv.

Place the axungia before a slow fire :—as soon as it is liquified, mix it with the oil in a large-necked bottle, having a ground-glass stopper, add the ammoniac, stop it close, shake it, and keep it in a cool place.* This body is homogeneous ; it reddens the skin in two or three minutes, raises a blister in five or six minutes ; and a slight touch of the pomade on the wound will form a cauterization in a few minutes. So that, independently of the advantage of not alarming the patient, this topic yields important succour in many serious maladies, which is, to produce rubification in a few seconds, and a blister, at the same time sparing the patient the inconveniences of cantharides. Thus then, it will be seen that I have substituted, in the place of sinciputal cauterization performed with incandescent steel, a small blister, by means of the ammoniacal pomade—subsequently I cauterize the sinciputal wound by the same means if it be necessary. But in no case do I ever employ these remedies until I have removed every trace of sanguine plethora :—and when I do perform the operation, I never fail to correct the very trifling irritation it may give rise to, by cupping with a slight scarification at the back of the neck, and frequently by dry cupping on the inferior members. To these remedies I add laxatives suited to the patient's constitution, principally to avoid the ill effects of constipation in cerebro-sensorial affections. These are the principal agents of sinciputal derivation. I also pay due attention to constitutional and other peculiarities, and thus parry every sinister tendency in the

* Vide my memoir on the use of fire, the air-pump, &c. &c. read at the Institute of France in 1818, and my Treatise on Derivation, 1837.

cerebrum. Having long since perceived that the cataract which exists simultaneously with other ocular affections, yields, like other maladies, to the sincipital treatment, I detailed the particulars of numerous cases calculated to establish the fact, and, on these data, I composed a memoir, and read it at the Institute of France in 1825. From that time I have had constant opportunities of appreciating the advantages of this method of treatment in cases of cataract. My most sanguine hopes and expectations have even been surpassed, since I have often succeeded in re-establishing the sight after an operation had failed so completely that the patient was not able to see his way.

The gradual progress of the cataract being, in general, slow, I think I may affirm that, dividing the time of its development into four parts, the malady is susceptible of being suspended or favorably modified during the first three stages. If I have frequently happened to obtain the same result after the cataract had assumed a greater degree of gravity, those cases can only be considered as rare occurrences and consequently exceptional.

Finally, in cases of cataract which cannot be operated upon in consequence of their being complicated with amaurosis, I undertake to treat them without hesitation, because 1st. I do not at all exclude the chance of an operation. 2nd. I have succeeded in restoring the sight. 3rd. I have sometimes succeeded in rendering an operation practicable.

List of Cases confided to my care at Moorfields Ophthalmic Hospital, by Mr. Tyrrell and his two assistants: MM. Mackmurdo and Dalrymple.

January 30th 1838.—John Betts, Goldsmith, No. 5, Wood-st. aged 64, a powerful man, and in a good state of health.

Pupils very much dilated by the effect of the belladonna, opaque circle at the lower part of the crystalline lens, opacity of the whole body of the lens in both eyes—more developed in the right eye than in the left—the patient complains of an appearance of filament in this organ, with which he is not able to see his way, nor distinguish any one by his side.

Small sincipital blister with the ammoniacal pomade—cupping at the back of the neck—ammoniacal collyrium on the eye-lids, forehead and temples—the same bathed with cold water to remove the collyrium—laxatives.

5th February.—The patient has been getting better since the commencement of the treatment.

11th.—He can see his way with the right eye—he can read.

20th.—The improvement continues. Mr. Tyrell has declared the same to the pupils.

2nd. March.—The patient declares that his eye is getting stronger, and that he can read much easier than he could ten days ago.

3rd.—Much better. He tells me that he can see very well notwithstanding the thick fog in the atmosphere.

23rd.—The patient declares that his sight is at present almost as good as it was before the attack, if not quite as good.

HARRIET SMITH, aged 52.—She has very decided cataracts which consist in opaque lines extending from the circumference of the crystalline lens to the centre; these lines diminish as they approach the centre, which is simply nebulous; vision troubled, objects indistinct.

January 30th 1838.—The patient finds her sight better, particularly in the right eye. Objects appear more distinct.

3rd. March.—She tells me she can sew, which she could not do before. She has a slight head-ache. I relieve her by cupping with trifling scarification.

23rd.—The sight is much improved—she can see to read and sew with much greater ease.

MARY BIRMINGHAM, aged 66, 2nd. February, 1838.—Cataract, much developed in both eyes. The right—pupil very narrow and little movement. The left—pupil dilated, immoveable, vision, totally obstructed.

9th.—The patient is much better. The right pupil still narrow; more movement.

13th. March.—The improvement continues.

THOMAS DOWN, No. 2, Clements Lane, City; aged 30, affected with a gutta-serena in the left eye for the last six months. Pupil much dilated, and little movement. Vision very imperfect for objects placed directly in front. In the room, the patient cannot recognize his friends with this organ. The right eye is healthy. This patient is obliged to read and write.

2nd. February 1838.—Sincipital wound, cupping, ammoniacal collyrium—laxatives. Immediately after the collyrium, the pupil contracts with greater ease—the vision is instantaneously better.

6th.—Decided improvement, acknowledged by Mr. Tyrrell and his pupils.

17th.—Heaviness in the head. Cupping at the back of the neck.

28th.—Now, as for several days past, this patient easily distinguishes objects in front. From my apartment, he reads the writing over the shop doors situated at a distance of forty feet.

The pupil appears to be almost in its natural state.

LOUIS ALLEN, Bootmaker, aged 66.—Has had twice, in both his eyes, the gutta-serena, of which he has been cured by Mr. Mackmurdo.

6th. February, 1838.—Pupil a little dilated—but little movement. Decided cataract in both eyes—the patient has much trouble to see his way: he has not been able to work since the end of December.

13th.—The patient is much better.

21st.—The patient declares that his sight improves.

3rd. March.—More movement in the pupil; the opacity of the lens appears diminished.

5th.—Much better—gradual improvement.

23rd.—He says that he can see his way perfectly well; every object, the carriages, placards, &c. appear perfectly distinct.

MR. CHARLES MILES, aged 60, Watchmaker, 34, Duke Street, Manchester Square.

13th February, 1838.—For 7 months past, he has apparently seen black filaments when looking with the left eye. In the right eye, there are no filaments, the affection only takes place through a dark mist. Decided cataract.

22nd.—The pupils had remained till this day under the influence of the bella-dona, appeared narrow, and to have very little movement. Although the cataracts are far from being complete, the patient complains of a dark mist which prevents him from seeing objects about him.

He is better each time after using the collyrium, but the improvement is not lasting.

3rd March.—He thinks he sees a little clearer with the left eye, and that the dark mist is a little diminished.

5th.—Permanently better.

23rd.—The mist diminishes gradually.

JOSEPH NORTON, aged 48.

23rd. February, 1838.—Cataract in a very advanced stage in the left eye, with a decided amaurosis.

Right eye—the sight lost for many years.

I have declared that I undertook to treat him principally with a view to extirpate, if possible, the amaurosis, in order to render the operation practicable, should I not succeed in arresting its progress.

2nd. March.—He says he is a little better (sight clearer).

3rd.—He says: better. The pupil is diminished in width, and has gained in motion.

He affirms that to-day he sees better than he did twelve months ago. He reads a little easier: the letters used to appear confused, —they now appear a little clearer. No head-ache.

5th.—The improvement continues, but still he experiences the greatest change immediately after the dressing.

22nd.—He reads better, particularly yesterday morning, when the letters in his book appeared much clearer, indeed quite plain.

GEORGE SMITH, aged 70.

23rd. February 1838.—Has a complete cataract in the right eye ; —in the left eye, a cataract in a very advanced stage :—pupils dilated by the bella-dona (great night-shade.)

I have consented to treat this patient to preserve what sight remains in the left eye.

28th.—After the application of the ammoniacal collyrium, the patient declares that he sees a little better.

2nd. March.—Ditto.

GEORGE HOLBROOK, sailor, aged 30.—Has a serious cerebral affection of long standing. Three years ago, at Macao, he had applied, at different times, 214 leeches about the eyes ; not being cured, he was sent home to Europe.

27th. February 1838.—Pupils dilated—little movement—vision troubled, accompanied by a green mist. The patient is hardly able to see his way. His face has the appearance of astonishment and fear.

After the use of the ammoniacal collyrium, the pupils have more movement, and the vision is clearer during an hour or two.

28th.—Sincipital cauterization by the ammoniacal pomade—cupping at the back of the neck.

3rd.—He declares that when at home, he perceives the objects about him better ;—his wife has remarked it. The pupils have more movement—his vision is generally better ; at intervals, it becomes almost perfect, but this degree of amendment does not last a very long time.

23rd.—The patient, in making a comparison, says, that before he was under my care, he could hardly see at all, even when the sun was shining, but that now he can see his way well. The mist is evidently diminished.

It is worthy of remark that all the patients are relieved by the treatment. We must, however, except one, George Smith, who has only been three times at Moorfields, on account of the distance from his place of residence, which is out of the town. In his case, my operations have been confined to the rubification of the sinciput, and the application of the ammoniacal collyrium on the eye-lids. He was better after the application of this remedy ; but this effect can only have been momentary ; and, the principal elements of the treat-

ment having been either not employed or not continued, the cataract, allowed to take its course, will necessarily increase until it has attained its extreme point of development.

These facts have their value in reference to the power of modifying the cataract when it is not too far advanced; and, supposing any one to have given credence to the assertion of Mr. Mackenzy (page 698 of his treatise on the Diseases of the Eye,) that I was mistaken in the character of the malady, all such imputation of error in this particular must now cease to have any weight, the existence of the cataract having been verified by oculists—MM. Tyrrell, Mackmurdo and Dalrymple.

But the importance of the above examples increases if we compare them with a great number of others which have been produced in Paris, and which can be verified with the greatest ease; viz: M. Le Vicomte de Montchenu, M. Le Vicomte de Prunelé, Mme. La Princesse de Broglie, Revel, Mme. Sirey, née du Saillant, Mme. La Marquise douairière de Dreux-Brézé, M. Durné, Mme. de Béru, M. de Franzenberg, M. le Général de Préchamps, &c. &c.

At all events, it would be very easy to prove, upon a greater scale, the effect of the derivative treatment in cases of cataract. More than any other town in Europe, London offers all the conditions for this demonstration—not only in the number of patients, but the impartiality of the oculists. It would be easy to collect a great number of patients affected with cataracts; the state of the eyes and the vision might be verified before and during the treatment by oculists. This means would be infallible in solving the question in a manner satisfactory to science and the cause of humanity.

For several years I have combated the practice of applying a great number of leeches to the head in cases of cerebral and sensorial affections.* The arguments that I have employed heretofore rest on facts, unfortunately too numerous, which prove the danger of this practice; and again, on the consequences resulting from the circulation of the head. This function is sustained in the brain, by a greater number of vessels and a greater quantity of blood than any other organ of the human body is furnished with.

The delicate and very ingenious experiments of Sir Astley Cooper on the different vessels of the head are pre-eminently calculated to throw a great light on physiology and therapeutics considered in relation to the encephalus. A ligature being placed on the two carotid arteries and the two vertebrals of a dog, the primitive vessels are replaced by new ones which perform the same functions, inasmuch that, after a certain time, the health of the animal is perfectly

* Read my treatise on Derivation, and my refutation of the treatise on Ophthalmology, by Dr. Sichel.

re-established. The anastomosis are in just proportion to the number of vessels tied; hence, the artery of the arm being tied, only one anastomosing vessel is formed, which suffices for the functions of the arm.

The following induction may be drawn from these different experiments; viz: that if, from any cause the patient has the blood forced to the head, as for example, by a great number of leeches, very hot baths, exposure to the sun, &c., he is subject to the formation of anastomosis in a corresponding ratio to the quantity of blood with which the head is overcharged. And this perfectly coincides with what we have often had opportunities of remarking,—that, by the abuse of leeches, the simple inflammation of the conjunctive is rapidly complicated with other contingencies resulting from the formation of sanguine vessels in parts generally unprovided with them, and hence arise, not only sclerotites, keratites, Irites, but lesions in parts still deeper placed. It is very probable that the amaurosis of our patient Holbrook has acquired its characteristic intensity and obstinacy by the application of two hundred and fourteen leeches to his eyes prescribed during his stay in China.

FINIS.

I feel a real pleasure in returning my sincere thanks to MR. SHORT, of 25, Castle Street, Leicester Square, whose general knowledge of the arts and sciences, has enabled him to express my ideas far better than any person merely a translator. I repeat that I feel much gratified by the opportunity thus offered me of rendering this impartial justice to an Englishman, though, at the same time, I must add, that the easy flow of his conversation in French, and his obliging manners, would induce me to look upon him as a compatriot.

I am only sorry that Mr. Short's talent is so little known, or so ill appreciated, that he is obliged to give lessons.





